

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
61 Forsyth Street, Suite 4T20  
Atlanta, Georgia 30303



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July 23, 2010

Roberta K. Bradford  
Deputy Secretary for Medicaid  
2727 Mahan Drive  
Mail Stop # 8  
Tallahassee, Florida 32308

RE: Florida Title XIX State Plan Amendment, Transmittal #09-006

Dear Ms. Bradford:

We have reviewed the proposed amendment to the Florida Medicaid State Plan that was submitted under transmittal number 09-006 and received in the Regional Office on March 25, 2009. This amendment's stated purpose is to amend the payment methodology for the Reimbursement Plan of Florida's County Health Departments.

Based on the information provided, we are pleased to inform you that Medicaid State Plan Amendment 09-006 was approved on July 23, 2010. The effective date of this amendment is March 1, 2009. We are enclosing the approved form HCFA-179 and approved plan pages.

Should you have questions or need any further assistance, please contact Mark Halter at (404) 562-7419, Elaine Elmore at (404) 562-7408 or Donald Graves at (919)-828-2999.

Sincerely,

/s/

Jackie Glaze  
Associate Regional Administrator  
Division of Medicaid & Children's Health Operations

Enclosures